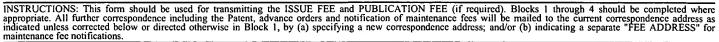
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
AFFEICATION NO.	FIEING DATE	PIKST NAMED INVENTOR	ATTORNET DOCKET NO.		
09/127,059	07/31/1998	AMEDEO LEONARDI	648/1D340-US	9662	

TITLE OF INVENTION: DIARYLALKYLPIPERAZINES ACTIVE ON THE LOWER URINARY TRACT

EXAMINER ART UNIT CLASS-SUBCLASS	1								
BERNHARDT, EMILY B 1624 514-253010 1. Change of correspondence address or indication of "Fee Address" (37) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data so only appropriate when an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Recordati S.A. Chemical and Pharmaceutical Company Please check the appropriate assignee category or categories (will not be printed on the patent): A. The following fee(s) are enclosed: 4b. Payment of Fee(s): XXA check in the amount of the fee(s) is enclosed. \$1330.00 Publication Fee Advance Order - # of Copies Deposit Account Number 104-0100 (enclose an extra copy of this form).	nonprovisional	NO	\$1330	\$0	\$1330	07/09/2004			
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